

# Worcestershire

Local Medical Committee Ltd

## NEWSLETTER

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20<sup>th</sup> September 2021

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### **#SUPPORT YOUR SURGERY CAMPAIGN**

At a time when so many are criticising general practice, we would encourage you to continue to use the resources and tools available on the [Support Your Surgery campaign page](#) to get the support of our patients to make the changes we urgently need to see.

The need for the campaign was clearly demonstrated this week as Sajid Javid, Secretary of State for Health and Social Care, showed how out of touch he is with the state of general practice through the [comments he made in parliament](#). We would therefore encourage patients and the profession to sign our petition calling on Government to provide the resourcing needed so that we can increase the number of GPs and other support staff in England.

This is one of the ways to address the concerns we share with our patients and to reduce the workload pressures we currently experience – and more [than 10,000 people have now signed our petition](#) - please show your support and sign it [here](#).

A paper version of the petition is also available to use in practices, and which could be used for the large number of patients attending surgeries, including in forthcoming vaccination sessions. Once completed, these can be emailed back to [info.gpc@bma.org.uk](mailto:info.gpc@bma.org.uk).

You can also show your support for the campaign by adding a '[Support Your Surgery](#)' Twibbon or [Twitter banner](#), or [Facebook banner](#), to your social media profiles.

### **LETTER TO SECRETARY OF STATE**

Following GPC's joint letter with RCGP, NHS Confederation and the Institute of General Practice Management (IGPM) sent last week, GPC have again [written](#) to the Secretary of State, Sajid Javid, to address the inflammatory [comments](#) he made in Parliament regarding increasing face-to-face GP appointments and that they were working with the BMA about this.

They pointed out that although GPs would like to be able to do this, the simple truth is that we need far more than just words to do so, and we need to remember "a return to how things were before the pandemic" would mean a return to a profession at breaking point, too few GPs, practice nurses, support staff, inadequate premises and longer waiting times to obtain an appointment for patients.

We have again called for urgent action from government to tackle these fundamental issues including an immediate suspension of QOF, not least following the impact of the blood bottle shortage and the ongoing workload pressures and restrictions practices are experiencing. Read [our statement in response to Sajid Javid's comments](#).

### **COVID VACCINATIONS**

#### COVID vaccinations for 12-15 year olds

The [UK CMOs have now advised](#) that the additional likely benefits of reducing educational disruption provide sufficient extra advantage in addition to the marginal advantage at an individual level identified by the [JCVI](#), and therefore recommend on public health grounds to extend the offer of vaccination with a first dose of Pfizer-BioNTech vaccine to *a//* children aged 12 to 15.

The [Enhanced Service Specifications](#) have been updated to include the expanded “at risk” group for 12-15 year olds, which means that practices will be covered by indemnity and can start vaccinating this group.

The [Collaboration Agreement](#) which has been approved by MHRA for phase 3 of the vaccination programme has been updated. Practice vaccination groups are required to have a Collaboration Agreement, although not required to use the template.

[Healthy school-aged children aged 12 to 15 will primarily receive their COVID-19 vaccination in their school](#), and practices will only be involved in the vaccination this group where the commissioner requests, *with the agreement of the practice*, and in collaboration with the school-aged immunisation service. GP vaccination sites should not therefore proactively vaccinate this group unless they have been requested to do so. Read the guidance from NHSE/I [here](#).

#### Booster vaccines

We welcome that the [JCVI has now confirmed that booster vaccines](#) should be offered to those more at risk from serious disease, and who were vaccinated during Phase 1 of the vaccine programme (priority groups 1 to 9). The booster vaccine dose should be offered no earlier than 6 months after completion of the primary vaccine course, in the same order as during Phase 1. We would anticipate that many GP practices will want to co-administer these boosters with flu vaccination and we expect local teams to facilitate this. There is also a need for government and NHSE/I to do far more to support practices, not only in the delivery of this important programme for our patients, but also to address the wider workload pressures practices are experiencing, something which is only likely to increase as the winter progresses.

[NHSE/I have announced](#) a further increase to the funding for PCN clinical directors from October to March 2022 although this will be from 0.25WTE to 0.75WTE rather than the higher 1WTE payment made previously. Whilst it is necessary to recognise the significant work clinical directors and those working with them are currently doing, it is disappointing that this has been reduced rather than increased further as is really needed. The [updated Phase 3 specification](#) has now been published.

GPC have also written to the MHRA asking for clarification with regards to the continued recommendation for a 15-minute observation period following provision of the Pfizer-BioNTech ‘Comirnaty’ vaccine for COVID-19. We

highlighted that this causes a particular problem for GP practices participating in the vaccination programme as many practice premises lack the facilities or space to safely undertake the required 15-minute observation period following provision.

### Recording overseas vaccinations

GPC continue to raise the issue of recording overseas vaccinations on practices' IT systems, a technical solution for recording on the NHS immunisation management service (NIMS) is still being worked up but not yet ready to roll out.

In the meantime, NHS Digital has advised that vaccination sites should follow the [guidance from Public Health England](#) (see pages 13 and the table on page 34-35), relating to vaccines given abroad, in terms of which vaccine should be given in England depending on which was given abroad.

If someone has had their first dose outside of the UK, they should be directed to a walk-in clinic which administers the same brand of vaccine they have had for their first dose, or a GP practice (especially if they have had a brand of vaccine not available in the UK) to arrange their second dose. Patients should be told that at this time, only vaccines delivered in the UK will count towards UK COVID-19 certification and that the NHS is working on a solution.

If a patient registered with a GP in England informs you that they have had a vaccination overseas, you may choose to record the details in the usual clinical notes section of the patient's GP record. Overseas vaccinations should not be added to the Pinnacle (Outcomes4Health) point of care system as this will result in incorrect GP payments.

### **BLOOD BOTTLE SUPPLY UPDATE**

NHSE/I has sent a [letter](#) to practices updating on the supply disruption of BD blood bottles. The availability of alternative products and improvement in BD's production capabilities, alongside the efforts of NHS staff to manage use, mean that the supply situation is no longer as constrained as it was. However, the issue has not yet been completely resolved.

The letter advises that testing activity in primary and community care, in line with the [best practice guidance](#), can resume, stocks permitting from 17 September. Practices are advised to work through any backlog of tests over a period of at least eight weeks, prioritising as required, in order to spread out demand for tubes. All organisations are asked to regularly review their stock holding and upcoming planned care requirements and aim not to re-stock to

more than one week's worth of tubes based on demand from June and July 2021.

Blood tests in hospital will still be more limited and GPC have asked NHSE/I to send messaging to hospitals to stop them shifting blood test requests to general practice.

### **COVID-19 RESPONSE: AUTUMN AND WINTER PLAN 2021**

The BMA has produced a short [briefing](#) regarding the Government's Winter Plan, outlining the main points expressed in the Secretary of State's speech and the Prime Minister's press conference.

- Although the worst case scenarios of the models look to be quite unlikely, there is still considerable risk of hospitalisations reaching unsustainable levels in the Winter.
- That the expected peak of infections in August may be delayed until October – coinciding with winter pressures.
- There is a significant degree of uncertainty and predicting the trajectory of infection is difficult.
- There is a great deal of consensus that acting earlier and introducing certain measures to limit contacts such as working from home could have a significant potential to mitigate the scale and speed of the infection trajectory; these would preferably be done when hospitalisations are already at a manageable level.

Read the BMA [press statement](#) which reflects their position on how they believe the Government should approach this period of time.

### **END OF THE SHIELDING PROGRAMME AND CLOSURE OF THE SHIELDED PATIENT LIST (SPL)**

The [Government has announced](#) that the shielding programme has now ended and patients will no longer be advised to shield. The Shielded Patient List will also be closed, and NHS Digital will retain the capability to identify high-risk patients in the future. Relevant patients will be written to inform them of this change and that support is still available. Practices do not need to inform patients themselves, and any future changes to the COVID-19 risk status for patients will no longer be captured on the national list.

### **HEALTH INEQUALITIES AND CLIMATE CHANGE**

This week GPC [wrote](#) to the President of the UN COP26 Climate Conference, Rt Hon. Alok Sharma MP, to highlight concerns about health inequalities and climate change. They made a number of recommendations to the Minister including the action government could take to support general practice to become carbon neutral, implementing a practice of return and recycling for medicines such as inhalers and for resources to meet the needs of practices in areas suffering from high levels of deprivation.

### **ARM UPDATE**

The BMA's [Annual Representative Meeting](#) was held earlier this week, where the Council chair Chaand Nagpaul's [speech](#) highlighted the pressures GPs are under, and that GPs and primary care teams have worked incessantly 7 days a week in vaccination centres while practices at the same time continued to provide essential services to their patients. He pointed out that it's therefore soul destroying for GPs to be publicly vilified for not being able to operate normally and that it was a failure of leadership by the NHS not to defend GPs. He said "what we needed was for ministers and NHS leaders to visibly congratulate and thank GPs and primary care teams for their heroic efforts in saving tens-of-thousands of lives."

A motion was passed at the ARM, which stated that 'primary care did not shut during the pandemic, but appropriately changed working practices to protect both patients and staff, continuing to see patients face to face where this was necessary' and called on 'the BMA to demand NHS England cease and desist from negative briefings suggesting otherwise'.

### **CHANGES TO THE COVID-19 TEST KIT DISTRIBUTION SERVICE**

From 4 October, an amended COVID-19 test kit distribution service will begin and as part of the changes, people will be asked to register on [www.gov.uk](http://www.gov.uk) or via 119 for a collect code to pick up test kits. More information is available from the Service Specification on the [NHS BSA website](#).

### **NHS-GALLERI CANCER TEST TRIAL**

The [NHS has launched a trial of a new blood test](#) that can detect more than 50 types of cancer before symptoms appear. The participants, aged between 50-77 and asymptomatic of cancer, are identified and invited through NHS DigiTrials to register their interest in being part of the study. Those who consent will be invited up to a mobile screening unit to give a blood sample.

The [NHS Galleri test trial](#) checks for the earliest signs of cancer in the blood and only those who have a positive Galleri test will be referred by the study team to a 2WW clinic based on the predicted cancer signal origin. Hence, any

GP involvement in this study is only if participants choose to contact them at any point in the trial process. A few GP practices have, in addition, volunteered to undertake trial recruitment from their lists and are liaising with the study team.

## **SUPPORTIVE CALL FROM WHO FOR INVESTMENT IN PRIMARY CARE POST COVID**

[Attached](#) is a statement by the WHO Regional Committee for Europe, about reinventing primary health care in the post-COVID-19 era, which calls for more investment in primary care.

## **WYCHAVON VACANCY**

Worcestershire LMC has a vacancy for a Wychavon Representative for a maternity cover for an initial period of 6 months although this may be extended on a month by month basis. If you work in this constituency area and would be interested to find out more about the LMC and the commitment involved please contact Lisa Siembab in the LMC Office: [lsiembab@worcslmc.co.uk](mailto:lsiembab@worcslmc.co.uk).

## **LMC SURVEY**

The latest LMC Survey is now live. Please could we ask for one completed per practice, although the survey itself is anonymous. The survey is not intended to be onerous and should only take a few minutes to complete.

This is a chance to inform and guide the work of the LMC on behalf of your practice. The survey will be open until close of play on **30th September 2021**.

Link to survey: <https://www.surveymonkey.co.uk/r/LLLR53H>

## **MENTOR SUPPORT**

Please find a flyer highlighting how you can access peer support during this time [here](#). More information about [wellbeing](#) support can be found on the LMC website.

## **MENTAL HEALTH AND WELLBEING SUPPORT**

### **Wellbeing**

We are fortunate to have excellent mental health support in place for general practice locally across both our counties. Do please access support if you need it and remember that it is very hard to look after others if you are not looking after yourself! The latest support available can be found on our [website](#).

There is help and assistance available within the Herefordshire and Worcestershire Healthy Minds service. They are able to provide bespoke talking therapies for all colleagues irrespective of your role in your organisations to assist with anxiety, low mood, stress and other common mental health problems. Referral is easy and can be completed via visiting <https://www.healthyminds.whct.nhs.uk/>. This is a NHS service and as such is free at the point of contact and confidential.

The Service Manager, Phill Morgan Henshaw is happy to answer any questions regarding referral and treatment and can be contacted on 01432 842200 or via [phill.morganhenshaw@nhs.net](mailto:phill.morganhenshaw@nhs.net).

### **BMA Mental Health and Wellbeing**

The BMA continues to offer [wellbeing services](#) and confidential 24/7 counselling and peer support for all doctors and medical students, as well as their partners and dependents, on 0330 123 1245. Access the [BMA's COVID-19 wellbeing pages here](#).

The BMA has welcomed the NHSE/I [announcement](#) of further funding for the expanded and rapid access provision of mental health services for NHS staff in England over the winter. This is urgently required and something the BMA has been calling for to support the major challenges NHS staff are facing. At the ARM, a motion was passed expressing concern at the potential long-term impact of the pandemic and called for resources to support the profession. As we head into a second wave of the virus it is vital that staff are protected. [Find out more here](#).

### **LMC WEBSITE**

The following guidance has been added to the LMC website [www.worcslmc.co.uk](http://www.worcslmc.co.uk) this week:

[Letter from GPC to SoS](#)  
[WHO/NSA Joint Statement](#)

### **COVID 19 RESOURCES**

[BMJ – news and resources](#)  
[RCGP COVID-19 information](#)  
[NHSE/I primary care bulletins](#)  
[NICE resources](#)



# WORCESTERSHIRE AND HEREFORDSHIRE LMC LTD

**Registered office: St Stephens Surgery, Adelaide Street, Redditch, Worcs B97 4AL  
Tel. 01527 65082**

All topical issues relating to local general practice are discussed at the monthly LMC meetings and those minutes can be read on the LMC [Website](#). Should you require further information on any issues raised at the LMC meetings please do not hesitate to contact the LMC representative for your area or practice.

## **MEMBERS OF THE WORCESTERSHIRE COMMITTEE**

- CHAIRMAN:** Dr David Herold  
Riverside Surgery, Waterside, Evesham, Worcs. WR11 1JP  
Tel: 01386 444400 Email: [d.herold@nhs.net](mailto:d.herold@nhs.net)
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St Stephens Surgery, (address and contact details as above)  
Email: [lsiembab@worcslmc.co.uk](mailto:lsiembab@worcslmc.co.uk)

## **Representatives:**

- |                     |  |                   |  |
|---------------------|--|-------------------|--|
| <b>BROMSGROVE:</b>  | Dr D Pryke<br>Dr K Hollier               | <b>REDDITCH:</b>  | Dr I Haines<br>Dr M Shah                 |
| <b>WYRE FOREST:</b> | Dr M Davis<br>Dr S Morton<br>Dr J Rayner | <b>WYCHAVON:</b>  | Dr D Herold<br>Dr J Rankin<br>Dr K Gines |
| <b>MALVERN:</b>     | Dr P Bunyan<br>Dr R Khehar               | <b>WORCESTER:</b> | Dr F Martin<br>Dr C Whyte<br>Dr R Benney |

**Co-opted Representatives:**

**Out of Hours:** Dr E Penny  
**Dispensing:** Dr J Rankin  
**Registrars Rep:** Dr J Chun (North)  
Dr L Jones (South)  
**First5 Rep:** Dr M Venables  
**IT Rep:** Dr R Williams  
**Non Principals:** Dr S Manton  
**Clinical Directors:** Dr R Williams  
**EDI:** Dr R Benney

**Practice Manager Representatives:**

Helen Garfield, Representative WF PM  
Michelle Hallahan, Representative R&B PM  
Meryl Foster, Representative SW PM

**Worcestershire GPC Representative:** Dr S Matthews

**The next LMC meetings will be:**

Worcestershire – 14<sup>th</sup> October 2021

